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|  |                                  |   |                                |                          |                                 |  |            | Application or Docket Number   |  |         |                            |  |  |  |  |  |  |  |  |
|--|----------------------------------|---|--------------------------------|--------------------------|---------------------------------|--|------------|--|--|---------|----------------------------|--|--|--|--|--|--|--|--|
| PATENT APPLICATION FEE DETERMINATION RECOI     |                                  |   |                                |                          |                                 |  | RD         | 09782304   |  |         |                            |  |  |  |  |  |  |  |  |
| Effective October 1, 2000                      |                                  |   |                                |                          |                                 |  |            |  |  |         |                            |  |  |  |  |  |  |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) |                                  |   |                                |                          |                                 | The same of the sa |            | SMALL ENTITY TYPE  |  |         | OTHER THAN OR SMALL ENTITY |  |  |  |  |  |  |  |  |
| TOTAL CLAIMS 13                                |                                  |   |                                |                          |                                 |  | RA         | TE   | FEE  |         | RATE                       | FEE  |  |  |  |  |  |  |  |
| FOR  |                                  |   | NUMBER FILED                   |                          | NUMBER EXTRA                    |  | BASI       | C FEE  | 355.00   | OR      | BASIC FEE                  | · 710.00   |  |  |  |  |  |  |  |
| TOTAL CHARGEABLE CLAIMS                        |                                  |   | 3 minus 20=                    |                          | • 0                             |  | X\$        | X\$ 9=   |  | OR      | X\$18=                     | 0  |  |  |  |  |  |  |  |
| INDEPENDENT CLAIMS                             |                                  |   | minus 3 =                      |                          | * O                             |  | X40=       |  |  | OR      | X80=                       | 0  |  |  |  |  |  |  |  |
| MU   | LTIPLE DEPEN                     | DENT CLAIM PI                             | RESENT                         |                          |                                 |  | +135=      |  |  | OR      | +270=                      | 0  |  |  |  |  |  |  |  |
| * If   | the difference i                 | in column 1 is                            | less than                      | zero, ente               | r "0" in c                      | column 2 TOTAL   |            | TAL  | <del>                                     </del> | OR      | TOTAL                      | 710-00   |  |  |  |  |  |  |  |
| CLAIMS AS AMENDED - PART II                    |                                  |   |                                |                          |                                 |  |            |  |  | •       | OTHER                      |  |  |  |  |  |  |  |  |
| (Column 1) (Column 2) (Column 3)               |                                  |   |                                |                          |                                 | (Column 3)   | SM         | ALL  | ENTITY   | OR<br>1 | SMALL                      |  |  |  |  |  |  |  |  |
| AMENDMENT A                                    |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                | NUM<br>PREVI             | MEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA   | RATE       |  | ADDI-<br>TIONAL<br>FEE                           |         | RATE                       | ADDI-<br>TIONAL<br>FEE                           |  |  |  |  |  |  |  |
| MQ.  | Total                            | . 8                                       | Minus                          | ** 2                     | _0                              | =  | X\$        | 9=   |  | OR      | X\$18=                     |  |  |  |  |  |  |  |  |
| ME   | Independent                      | * /                                       | Minus                          | ***                      | 3                               | = _  | X4         | l0=  |  | OR      | X80=                       |  |  |  |  |  |  |  |  |
|  | FIRST PRESE                      | NTATION OF M                              | ULTIPLE D                      | EPENDEN                  | T CLAIM                         |  | ±17        | <br>35=  |  | OR      | +270=                      |  |  |  |  |  |  |  |  |
|  |                                  |   |                                |                          |                                 |  | <u> </u>   | OTAL   |  | OR      | TOTAL                      |  |  |  |  |  |  |  |  |
|  | (Column 1) (Column 2) (Column 3) |   |                                |                          |                                 |  |            | r. FEE   |  | 100     | ADDIT. FEE                 | <u> </u>   |  |  |  |  |  |  |  |
| _  |                                  | CLAIMS                                    | a pina                         | HIG                      | HEST<br>MBER                    | PRESENT  |            |  | ADDI-  | 1       |                            | ADDI-  |  |  |  |  |  |  |  |
| AENT B   |                                  | REMAINING<br>AFTER<br>AMENDMENT           |                                | PREV                     | IOUSLY<br>FOR                   | PRESENT<br>EXTRA   | RA         | TE   | TIONAL<br>FEE                                    |         | RATE                       | TIONAL<br>FEE                                    |  |  |  |  |  |  |  |
| Š  | Total                            | · 12                                      | Minus                          | **                       |                                 | =  | X\$        | 9=   |  | OR      | X\$18=                     |  |  |  |  |  |  |  |  |
| AMENDA   | Independent                      | ·   | Minus                          | ***                      | TOLAN                           | ]=   | X4         | l0=  |  | OR      | X80=                       |  |  |  |  |  |  |  |  |
|  | FIRST PRESE                      | NTATION OF M                              | ULTIPLE C                      | PEPENDEN                 | II CLAIM                        |  | +10        | 35=  |  | OR      |                            |  |  |  |  |  |  |  |  |
|  |                                  |   |                                |                          |                                 |  | T<br>ADDIT | OTAL   |  | OR      | TOTAL                      |  |  |  |  |  |  |  |  |
|  | (Column 1) (Column 2) (Column 3) |   |                                |                          |                                 |  |            | ı, F <b>CC</b>   |  |         | ADDII. I EL                |  |  |  |  |  |  |  |  |
| AMENDMENT C                                    |                                  | CLAIMS REMAINING AFTER AMENDMENT          |                                | HIG<br>NUM<br>PREV       | HEST<br>MBER<br>YOUSLY<br>D FOR | PRESENT<br>EXTRA   | RA         | TE   | ADDI-<br>TIONAL<br>FEE                           |         | RATE                       | ADDI-<br>TIONAL<br>FEE                           |  |  |  |  |  |  |  |
|  | Total                            | *   | Minus                          | **                       |                                 | =  | X\$        | 9=   |  | OR      | X\$18=                     |  |  |  |  |  |  |  |  |
| MEN  | Independent                      | *   | Minus                          | ***                      |                                 | =  | <b> </b> - | l0=  | <del>                                     </del> | 1       | X80=                       | <del>                                     </del> |  |  |  |  |  |  |  |
| <u> </u>                                       | FIRST PRESE                      | NTATION OF M                              | ULTIPLE C                      | PEPENDEN                 | IT CLAIM                        |  |            |  | <del>                                     </del> | OR      | 070                        | <del>                                     </del> |  |  |  |  |  |  |  |
|  | If the entry in colu             | mn 1 is less than t                       | he entry in a                  | olumn 2 wei              | ite "O" in co                   | olumn 3  |            | 35=<br>35=   | <u></u>  | OR      | TOTAL                      | <u> </u>   |  |  |  |  |  |  |  |
| **   | If the "Highest Nu               | mber Previously P                         | Paid For" IN T<br>Paid For" IN | THIS SPACE<br>THIS SPACE | is less that<br>is less that    | an 20, enter "20.'<br>an 3, enter "3."   | " ADDIT    |  |  | OR      | ADDIT. I EL                | <u></u>  |  |  |  |  |  |  |  |
|  | The "Highest Nun                 | nber Previously Pa                        | aid For" (Total                | al or Indepen            | ident) is the                   | e highest numbe  | r found in | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |         |                            |  |  |  |  |  |  |  |  |